

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____ Chapter 7☐ Check if this is an amended filing**Official Form 201****Voluntary Petition for Non-Individuals Filing for Bankruptcy****02/20**If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.**1. Debtor's name** OutRight Avionics, LLC**2. All other names debtor used in the last 8 years** _____
_____Include any assumed names, trade names, and *doing business as* names
_____**3. Debtor's federal Employer Identification Number (EIN)** 4 7 - 1 7 3 9 1 7 7**4. Debtor's address** **Principal place of business** **Mailing address, if different from principal place of business**Number Street
10078 Airport Rd
Conroe, TX 77303
City State ZIP CodeMontgomery
CountyNumber Street
P.O. Box
City State ZIP Code**Location of principal assets, if different from principal place of business**Number Street
City State ZIP Code**5. Debtor's website (URL)** www.outrightavionics.com**6. Type of debtor**
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify: _____

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes> .

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**
- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than (amount subject to adjustment on and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☐ No

☒ Yes. Debtor John and Kristin Galik Relationship Owners
District Southern District of Texas When _____

MM / DD / YYYY

List all cases. If more than 1, attach a separate list.

Case number, if known _____
Voluntary Petition for Non-Individuals Filing for Bankruptcy

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☒ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** *(Check all that apply.)*☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.What is the hazard?
_____☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number Street

City

State

ZIP Code

Is the property insured?☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds?***Check one:*

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- ☐ 1-49 ☐ 50-99 ☐ 1,000-5,000 ☐ 25,001-50,000
- ☒ 100-199 ☐ 200-999 ☐ 5,001-10,000 ☐ 50,000-100,000
- ☐ 10,001-25,000 ☐ More than 100,000

15. Estimated assets

- ☐ \$0-\$50,000 ☒ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
- ☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
- ☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
- ☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- ☐ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☐ I have been authorized to file this petition on behalf of the debtor.
- ☐ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/07/2020
MM/ DD/ YYYY**X**/s/ John Galik
Signature of authorized representative of debtorJohn Galik
Printed nameTitle President**18. Signature of attorney****X**/s/ Allison D. Byman
Signature of attorney for debtorDate 04/07/2020
MM/ DD/ YYYYAllison D. Byman
Printed nameByman & Associates, PLLC
Firm name7924 Broadway Suite 104
Number StreetPearland TX 77581
City State ZIP Code(281) 884-9269 adb@bymanlaw.com
Contact phone Email address24040773 TX
Bar number State

Fill in this information to identify the case:

Debtor name OutRight Avionics, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property****12/15**

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes. Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1 Security Bank CrawfordChecking account7558\$711.72**Additional Page Total - See continuation page for additional entries**\$678.03**4. Other cash equivalents (Identify all)**

None

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$1,389.75**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**☒ No. Go to Part 3.☐ Yes. Fill in the information below.**Current value of debtor's interest****7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

None

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

None

9. Total of Part 2

Add lines 7 through 8 (including amounts on any additional sheets). Copy the total to line 81. _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.Current value of debtor's
interest**11. Accounts Receivable**

11a. 90 days old or less:	<u>\$147,500.94</u>	-	<u>\$0.00</u>	= →	<u>\$147,500.94</u>
	face amount		doubtful or uncollectible accounts			

11b. Over 90 days old:	<u>\$96,491.41</u>	-	<u>\$96,491.41</u>	= →	<u>\$0.00</u>
	face amount		doubtful or uncollectible accounts			

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$147,500.94**Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.Valuation method used for
current valueCurrent value of debtor's
interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

None

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of fund or stock: % of ownership:

None

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

None

17. Total of Part 4

Add lines 14 through 16 (including any additional sheets). Copy the total to line 83. _____

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

19.1 <u>Installation/Repair Parts Inventory</u>	_____	<u>(Unknown)</u>	_____	<u>\$38,193.27</u>
	MM / DD / YYYY			

20. Work in progress

None

21. Finished goods, including goods held for resale

None

22. Other inventory or supplies

<u>Serviceable and New Installation</u>	_____	<u>(Unknown)</u>	_____	<u>\$11,350.00</u>
22.1 <u>Service Supplies</u>	_____			
	MM / DD / YYYY			

23. Total of Part 5

Add lines 19 through 22 (including any additional sheets). Copy the total to line 84. _____

\$49,543.27**24. Is any of the property listed in Part 5 perishable?**

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops — either planted or harvested

None

29. Farm animals *Examples: Livestock, poultry, farm-raised fish*

None

30. Farm machinery and equipment (Other than titled motor vehicles)

None

31. Farm and fishing supplies, chemicals, and feed

None

32. Other farming and fishing-related property not already listed in Part 6

None

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85. _____

34. Is the debtor a member of an agricultural cooperative?

- ☒ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☒ No
- ☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture

39.1 <u>Office furniture and cabinets</u>	<u>(Unknown)</u>		<u>\$20,280.00</u>
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40. Office fixtures

None

41. Office equipment, including all computer equipment and communication systems equipment and software

41.1 <u>Test Equipment</u>	<u>(Unknown)</u>		<u>\$92,572.00</u>
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Additional Page Total - See continuation page for additional entries

\$224,600.00**42. Collectibles** Examples: Antiques and figurines; paintings, prints or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

None

43. Total of Part 7

Add lines 39 through 42. Copy the total to line 86.

\$337,452.00**44. Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	---	------------------------------------

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

47.1 Golf cart (Street legal with title) (Unknown) \$4,000.00

- 48.
- Watercraft, trailers, motors, and related accessories**
- Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

None

- 49.
- Aircraft and accessories**

None

- 50.
- Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

None

- 51.
- Total of Part 8**

Add lines 47 through 50. Copy the total to line 87.

\$4,000.00

- 52.
- Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No☐ Yes

- 53.
- Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No☐ Yes**Part 9: Real Property**

- 54.
- Does the debtor own or lease any real property?**

☐ No. Go to Part 10.☒ Yes. Fill in the information below.**General description**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available

Nature and extent of debtor's interest in property**Net book value of debtor's interest**
(Where available)**Valuation method used for current value****Current value of debtor's interest**

- 55.
- Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest**

55.1 LEASED PROPERTY Lease (Unknown) \$0.00

- 56.
- Total of Part 9**

Add the current value on lines 55.1 through 55.3 and entries from any addition sheets. Copy the total to line 88.

\$0.00

- 57.
- Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No☐ Yes

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No☐ Yes**Part 10:** Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

☐ No. Go to Part 11.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

60. Patents, copyrights, trademarks, and trade secrets

None

61. Internet domain names and websites

61.1 www.outrightavionics.com (Unknown) \$0.00

62. Licenses, franchises, and royalties

62.1 Repair Station Certificate (Unknown) \$250,000.00

63. Customer lists, mailing lists, or other compilations

None

64. Other intangibles, or intellectual property

None

65. Goodwill

None

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

\$250,000.00

67. Do your lists or records include personally identifiable information of customers? (as defined in 11 U.S.C. §§ 101(41A) and 107)

☒ No☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☒ No☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No☐ Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**☐ No. Go to Part 12.☒ Yes. Fill in the information below.**Current value of debtor's interest****71. Notes receivable**

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

72.1 NOL 2019 Tax year: 2019 \$255,000.0072.2 NOL 2018 Tax year: 2018 \$310,488.00**73. Interests in insurance policies or annuities**

None

74. Causes of action against third parties (whether or not a lawsuit has been filed)74.1 Claim against Eric Spain et al 20-03-03679 for stopping payment on a check \$20,406.82Nature of Claim Recovery of amounts dueAmount Requested \$20,406.82**Additional Page Total** - See continuation page for additional entries \$0.00**75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed Examples: Season tickets, country club membership

None

78. Total of Part 11Add lines 71 through 77. Copy the total to line 90. \$585,894.82

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No

☐ Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 12: Summary

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	<u>\$1,389.75</u>	
81. Deposits and prepayments. Copy line 9, Part 2.	<u></u>	
82. Accounts receivable. Copy line 12, Part 3.	<u>\$147,500.94</u>	
83. Investments. Copy line 17, Part 4.	<u></u>	
84. Inventory. Copy line 23, Part 5.	<u>\$49,543.27</u>	
85. Farming and fishing-related assets. Copy line 33, Part 6.	<u></u>	
86. Office furniture, fixtures, and equipment; collectibles. Copy line 43, Part 7.	<u>\$337,452.00</u>	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	<u>\$4,000.00</u>	
88. Real property. Copy line 56, Part 9.....		→ <u>\$0.00</u>
89. Intangibles and intellectual property. Copy line 66, Part 10.	<u>\$250,000.00</u>	
90. All other assets. Copy line 78, Part 11.	+ <u>\$585,894.82</u>	
91. Total. Add lines 80 through 90 for each column.....	91a. <u>\$1,375,780.78</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92		<u>\$1,375,780.78</u>

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Additional Page**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts - Continued**

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.2 <u>Plains State Bank (subject to garnishment)</u>	<u>Checking account</u>	<u>8759</u>	<u>(Unknown)</u>
3.3 <u>Chase Bank (subject to garnishment)</u>	<u>Checking account</u>		<u>(Unknown)</u>
3.4 <u>Allegiance Bank</u>	<u>Checking account</u>	<u>4795</u>	<u>\$678.03</u>

General description**Net book value of debtor's interest**
(Where available)**Valuation method used for current value****Current value of debtor's interest****41. Office equipment - Continued**

41.2 <u>Wire Room</u>	<u>(Unknown)</u>		<u>\$8,125.00</u>
41.3 <u>Equipment for Sale</u>	<u>(Unknown)</u>		<u>\$184,125.00</u>
<u>Laser cutter, welder, shelving, ladder, air compressor, break/press, work bench with sander and drill press, jacks and tail stands, storage cabinets, tow bars, power cart, and tail stands, storage cabinets, tow bars, power cart, rollable work stations (6); cleaning supplies</u>			
41.4	<u>(Unknown)</u>		<u>\$32,350.00</u>

Current value of debtor's interest**72. Tax refunds and unused net operating losses (NOLs) - Continued**

Description (for example, federal, state, local)

72.2 <u>NOL 2018</u>	Tax year: <u>2018</u>	<u>\$310,488.00</u>
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74. Causes of action against third parties (whether or not a lawsuit has been filed) - Continued74.2 Claim against Garmin for termination/breach of contract

Nature of Claim _____

Amount Requested <u>(Unknown)</u>	<u>(Unknown)</u>
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Fill in this information to identify the case:

Debtor name OutRight Avionics, LLCUnited States Bankruptcy Court for the:
Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.*Column A***Amount of claim**
Do not deduct the value of collateral.*Column B***Value of collateral that supports this claim****2.1 Creditor's name**Allegiance Bank**Creditor's mailing address**8727 W. Sam Houston Parkway N. Suite 100Houston, TX 77040**Creditor's email address, if known****Date debt was incurred** _____**Last 4 digits of account number**8 0 4 6**Do multiple creditors have an interest in the same property?**

- ☐ No.
- ☒ Yes. Specify each creditor, including this creditor, and its relative priority.

For Asset: Accounts receivable under 90 days**1) Allegiance Bank****2) Security Bank Crawford****For Asset: Installation/Repair Parts Inventory****1) Allegiance Bank****2) Security Bank Crawford****Describe debtor's property that is subject to a lien**Accounts receivable under 90 daysInstallation/Repair Parts InventoryLaser cutter, welder, shelving, ladder, air compressor, break/press, work bench with sander and drill press, jacks and tail stands, storage cabinets, tow bars, power cart, rollable work stations (6); cleaning suppliesOffice furniture and cabinetsServiceable and New Installation Service SuppliesSee continuation page.**Describe the lien****Is the creditor an insider or related party?**

- ☒ No
- ☐ Yes.

Is anyone else liable on this claim?

- ☐ No
- ☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

- Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

\$94,147.34\$350,371.21**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**\$1,444,314.51

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim**

For Asset: Laser cutter, welder, shelving,
ladder, air compressor, break/press, work
bench with sander and drill press, jacks
and tail stands, storage cabinets, tow bars,
power cart, rollable work stations (6);
cleaning supplies

1) Allegiance Bank

2) Security Bank Crawford

For Asset: Serviceable and New
Installation Service Supplies

1) Allegiance Bank

2) Security Bank Crawford

For Asset: Test Equipment

1) Allegiance Bank

2) Security Bank Crawford

For Asset: Wire Room

1) Allegiance Bank

2) Security Bank Crawford

2.2**Creditor's name**Allegiance Bank**Describe debtor's property that is subject to a lien**\$102,153.67unknown**Describe the lien****Creditor's mailing address**8727 W. Sam Houston Parkway N. Suite 100Houston, TX 77040**Creditor's email address, if known****Date debt was incurred** _____**Last 4 digits of account
number**0 8 8 3**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?**Is the creditor an insider or related party?**☒ No☐ Yes.**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A**Amount of claim**
Do not deduct the
value of collateral.**Column B****Value of collateral
that supports this
claim**

2.3	Creditor's name Ball, Tom	Describe debtor's property that is subject to a lien _____	<u>\$63,201.23</u>	<u>unknown</u>
	Creditor's mailing address 222 Club Island Way Montgomery, TX 77356	Describe the lien Judgment		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.		
	Date debt was incurred _____	Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?			
	Remarks: Writ of Execution			

2.4	Creditor's name Byrd Jr, Jerome	Describe debtor's property that is subject to a lien _____	<u>\$200,000.00</u>	<u>unknown</u>
	Creditor's mailing address 3307 Courtland Manor Lane Kingwood, TX 77339	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.		
	Date debt was incurred _____	Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?			

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A**Amount of claim**
Do not deduct the value of collateral.**Column B****Value of collateral that supports this claim**

2.5 Creditor's name <u>Kabbage/Celtic Bank</u> Creditor's mailing address <u>PO Box 77081</u> <u>Atlanta, GA 30357</u> Creditor's email address, if known _____ Date debt was incurred <u>2/2020</u> Last 4 digits of account number <u>4 3 9 0</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?	Describe debtor's property that is subject to a lien _____ Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$110,000.00</u>	<u>unknown</u>
2.6 Creditor's name <u>OnDeck Capital, Inc.</u> Creditor's mailing address <u>101 West Colfax Ave., 10th Floor</u> <u>Denver, CO 80202</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Have you already specified the relative priority?	Describe debtor's property that is subject to a lien _____ Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$254,000.24</u>	<u>unknown</u>

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim****2.7****Creditor's name**Plains State Bank**Describe debtor's property that is subject to a lien**\$350,000.00unknown**Creditor's mailing address**PO Box 62005Houston, TX 77205**Describe the lien****Is the creditor an insider or related party?**☒ No☐ Yes.**Creditor's email address, if known****Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Date debt was incurred** _____**Last 4 digits of account
number**1 3 0 0**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Do multiple creditors have an interest in the same
property?**☒ No.☐ Yes. Have you already specified the relative
priority?**Remarks:** SBA Loan/Line of Credit

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim**

2.8 Creditor's name <u>Security Bank Crawford</u> Creditor's mailing address <u>PO Box 90</u> <u>Crawford, TX 76638</u> Creditor's email address, if known _____ Date debt was incurred <u>2017</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> Do multiple creditors have an interest in the same property? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? For Asset: Accounts receivable under 90 days <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u> For Asset: Test Equipment <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u> For Asset: Installation/Repair Parts Inventory <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u> For Asset: Laser cutter, welder, shelving, ladder, air compressor, break/press, work bench with sander and drill press, jacks and tail stands, storage cabinets, tow bars, power cart, rollable work stations (6); cleaning supplies <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u>	Describe debtor's property that is subject to a lien <u>Accounts receivable under 90 days</u> <u>Test Equipment</u> <u>Installation/Repair Parts Inventory</u> <u>Laser cutter, welder, shelving, ladder, air compressor, break/press, work bench with sander and drill press, jacks and tail stands, storage cabinets, tow bars, power cart, rollable work stations (6); cleaning supplies</u> <u>Serviceable and New Installation Service Supplies</u> See continuation page. Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$270,812.03</u>	<u>\$330,091.21</u>
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Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

**Value of collateral
that supports this
claim**

For Asset:

**Serviceable and New Installation Service
Supplies**

☐ No. Specify each creditor, including this
creditor, and its relative priority.

☒ Yes. The relative priority of creditors is
specified on lines 2.1

For Asset:

Wire Room

☐ No. Specify each creditor, including this
creditor, and its relative priority.

☒ Yes. The relative priority of creditors is
specified on lines 2.1

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
_____	Line _____	_____
_____		_____
_____		_____

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page**2.****2.1 Creditor's name**Allegiance Bank**Describe debtor's property that is subject to a lien**

Test Equipment

Test Equipment

Wire Room

2.2 Creditor's nameAllegiance Bank**Describe debtor's property that is subject to a lien****2.3 Creditor's name**Ball, Tom**Describe debtor's property that is subject to a lien****2.4 Creditor's name**Byrd Jr, Jerome**Describe debtor's property that is subject to a lien****2.5 Creditor's name**Kabbage/Celtic Bank**Describe debtor's property that is subject to a lien****2.6 Creditor's name**OnDeck Capital, Inc.**Describe debtor's property that is subject to a lien****2.7 Creditor's name**Plains State Bank**Describe debtor's property that is subject to a lien****2.8 Creditor's name**Security Bank Crawford**Describe debtor's property that is subject to a lien**

Wire Room

Wire Room

Fill in this information to identify the case:

Debtor name OutRight Avionics, LLCUnited States Bankruptcy Court for the:
Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507)☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1** Priority creditor's name and mailing addressInternal Revenue ServiceInsolvency Section1919 Smith St., Stop 5022 HOUHouston, TX 77002Date or dates debt was incurred
_____Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) **(8)**

Remarks: Outright Avionics 940/941

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent☒ Unliquidated☐ Disputed

Basis for the Claim:

Employment Taxes

Is the claim subject to offset?

☒ No☐ Yes

Total claim

\$49,825.26

Priority amount

\$49,825.26**2.2** Priority creditor's name and mailing addressTexas Comptroller of Public Accounts111 East 17th StreetAustin, TX 78774Date or dates debt was incurred
_____Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) **(8)**Remarks: Sales tax, subject to reduction based on
refunds

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent☒ Unliquidated☐ Disputed

Basis for the Claim:

Is the claim subject to offset?

☒ No☐ Yes\$33,136.28\$33,136.28

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>Air Capital Dial, Inc.</u> <u>220 N. Vine</u> <u>Wichita, KS 67203</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,312.55</u>
3.2	Nonpriority creditor's name and mailing address <u>Aircraft Spruce & Specialty</u> <u>225 Airport Circle</u> <u>Corona, CA 92878</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,546.84</u>
3.3	Nonpriority creditor's name and mailing address <u>Alamo Plating & Metal Finish</u> <u>9230 Converse Business Ln.</u> <u>Converse, TX 78109</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$351.00</u>
3.4	Nonpriority creditor's name and mailing address <u>Allied Electronics</u> <u>7151 Jack Newell Blvd. S</u> <u>Fort Worth, TX 76118</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>2 3 6 5</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$665.00</u>
3.5	Nonpriority creditor's name and mailing address <u>Amador, Jose A</u> <u>19603 Swan Valley Dr</u> <u>Cypress, TX 77433</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$14,660.00</u>

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.6 Nonpriority creditor's name and mailing address <u>American Express</u> <u>P.O. Box 650448</u> <u>Dallas, TX 75265</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>1 0 0 5</u>	As of the petition filing date, the claim is: <u>\$3,271.59</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7 Nonpriority creditor's name and mailing address <u>Amex</u> <u>Correspondence/Bankruptcy</u> <u>PO Box 981540</u> <u>El Paso, TX 79998-1540</u> Date or dates debt was incurred <u>1/1/2016</u> Last 4 digits of account number <u>5 5 1 3</u>	As of the petition filing date, the claim is: <u>\$3,931.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8 Nonpriority creditor's name and mailing address <u>Anantasomboon, Kris</u> <u>705 Glaze Circle</u> <u>Hewitt, TX 76643</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$800.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9 Nonpriority creditor's name and mailing address <u>Anderson, Roy</u> <u>4900 Courthouse Rd</u> <u>Gulfport, MS 39507</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$100,000.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10 Nonpriority creditor's name and mailing address <u>Apple Card</u> <u>P.O. Box 7247</u> <u>Philadelphia, PA 19170</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>8 9 9 0</u>	As of the petition filing date, the claim is: <u>\$5,315.14</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.11 Nonpriority creditor's name and mailing address <u>Arana, Carlos</u> <u>15 Split Rail PI</u> <u>Spring, TX 77382</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$42,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12 Nonpriority creditor's name and mailing address <u>Aspen Avionics</u> <u>5001 Indian School Road, NE</u> <u>Albuquerque, NM 87110</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$31,564.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13 Nonpriority creditor's name and mailing address <u>Associated Aircraft Supply, LLC</u> <u>3250 Stone Myers Parkway</u> <u>Grapevine, TX 76051</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,044.07</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14 Nonpriority creditor's name and mailing address <u>AT&T</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number <u>0 0 0 1</u>	As of the petition filing date, the claim is: <u>\$178.56</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Cell phone</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15 Nonpriority creditor's name and mailing address <u>Aviall/Boeing Company</u> <u>PO Box 619048</u> <u>Dallas, TX 75261</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>7 0 9 5</u>	As of the petition filing date, the claim is: <u>\$299.90</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.16	Nonpriority creditor's name and mailing address <u>Bank of America</u> <u>PO Box 851001</u> <u>Dallas, TX 75285-1001</u> Date or dates debt was incurred <u>5/1/2008</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address <u>Beaver, Jason</u> <u>950 Seven Hills Dr 1124</u> <u>Henderson, NV 89052</u> Date or dates debt was incurred _____ Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$9,504.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address <u>Beecher, Chuck</u> <u>4230 SE King Rd Unit 365</u> <u>Portland, OR 97222</u> Date or dates debt was incurred _____ Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$67,995.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address <u>Bentwater Yacht and Country Club</u> <u>800 Bentwater Dr</u> <u>Montgomery, TX 77356-8256</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>0 4 5 2</u>	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Nonpriority creditor's name and mailing address <u>Berman, Josh</u> <u>14119 Renee Lane</u> <u>College Station, TX 77845</u> Date or dates debt was incurred _____ Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$2,995.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.21	Nonpriority creditor's name and mailing address <u>BHE & Associates Ltd.</u> <u>12002 Warfield St Ste 250</u> <u>San Antonio, TX 78216-3219</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,975.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address <u>Bledsoe, Al</u> <u>1201 The Cape Rd</u> <u>Horseshoe Bay, TX 78657</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$28,088.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address <u>Boxwell Avionics</u> <u>3050 Airman Dr.</u> <u>Fort Pierce, FL 34946</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,200.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address <u>Brandley, Christopher S</u> <u>12370 Ridgecrest</u> <u>Willis, TX 77318</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,187.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Nonpriority creditor's name and mailing address <u>Bridges, Neal</u> <u>15421 Highway 12</u> <u>Orange, TX 77632</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$25,913.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.26	Nonpriority creditor's name and mailing address <u>Briscoe, Robert M</u> <u>4401 Gibson St</u> <u>Houston, TX 77007</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$25,914.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address <u>Buca, Stefan</u> <u>1024 N Oak Cliff Blvd</u> <u>Dallas, TX 75208</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,371.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address <u>Cal America Mobil</u> <u>4145 Belt Line Rd # 212-247</u> <u>Addison, TX 75001-4324</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,545.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Nonpriority creditor's name and mailing address <u>Capital One</u> <u>Attn: Bankruptcy</u> <u>PO Box 30285</u> <u>Salt Lake City, UT 84130-0285</u> Date or dates debt was incurred <u>1/1/2016</u> Last 4 digits of account number <u>2 9 1 9</u>	As of the petition filing date, the claim is: <u>\$16,375.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Nonpriority creditor's name and mailing address <u>Capital One</u> <u>Attn: Bankruptcy</u> <u>PO Box 30285</u> <u>Salt Lake City, UT 84130-0285</u> Date or dates debt was incurred <u>6/1/2015</u> Last 4 digits of account number <u>1 8 7 7</u>	As of the petition filing date, the claim is: <u>\$5,308.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.31 Nonpriority creditor's name and mailing address <u>Carper, Paul</u> <u>10070 Airport Road</u> <u>Conroe, TX 77303</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$63,244.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32 Nonpriority creditor's name and mailing address <u>Cary, Steve</u> <u>4320 Brownstone Dr</u> <u>Beaumont, TX 77706</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,490.80</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33 Nonpriority creditor's name and mailing address <u>Castleberry Instruments</u> <u>13405 Immanuel Rd Ste 1a</u> <u>Pflugerville, TX 78660-8338</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,020.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34 Nonpriority creditor's name and mailing address <u>Catalani, Dave</u> <u>234 Tortoisde Creek Pl</u> <u>Spring, TX 77389</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,048.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35 Nonpriority creditor's name and mailing address <u>Centerpoint</u> <u>P.O. Box 4981</u> <u>Houston, TX 77210-4981</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>1 0 - 8</u>	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.36 Nonpriority creditor's name and mailing address <u>Century Flight Systems, Inc.</u> <u>Po Box 610</u> <u>Mineral Wells, TX 76068-0610</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$277.10</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37 Nonpriority creditor's name and mailing address <u>Ces/clsf</u> <u>C/o Acs</u> <u>Utica, NY 13501</u> Date or dates debt was incurred <u>6/14/2005</u> Last 4 digits of account number <u>3 5 1 1</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38 Nonpriority creditor's name and mailing address <u>Chase Card Services</u> <u>Attn: Bankruptcy</u> <u>PO Box 15298</u> <u>Wilmington, DE 19850</u> Date or dates debt was incurred <u>1/1/2016</u> Last 4 digits of account number <u>4 8 6 4</u>	As of the petition filing date, the claim is: <u>\$7,950.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39 Nonpriority creditor's name and mailing address <u>Chase Card Services</u> <u>PO Box 15123</u> <u>Wilmington, DE 19850</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>5 5 9 0</u>	As of the petition filing date, the claim is: <u>\$5,004.66</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40 Nonpriority creditor's name and mailing address <u>City of Conroe</u> <u>Alarms Division</u> <u>PO Box 140875</u> <u>Irving, TX 75014</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>9 5 1 5</u>	As of the petition filing date, the claim is: <u>\$30.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.41	Nonpriority creditor's name and mailing address <u>City of Conroe</u> <u>Water Department</u> <u>PO Box 1669</u> <u>Houston, TX 77251</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$188.55</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.42	Nonpriority creditor's name and mailing address <u>Clean Planes "R" Us</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,200.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	Nonpriority creditor's name and mailing address <u>Coats & Evans, PC</u> <u>Attn: Gary L Evans</u> <u>P.O. Box 130246</u> <u>Spring, TX 77393</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Nonpriority creditor's name and mailing address <u>Cohron, John</u> <u>20630 Sundance Springs Ln</u> <u>Spring, TX 77379</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$16,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.45	Nonpriority creditor's name and mailing address <u>Comenity Bank/Jared</u> <u>Attn: Bankruptcy</u> <u>PO Box 182273</u> <u>Columbus, OH 43218</u> Date or dates debt was incurred <u>9/1/2008</u> Last 4 digits of account number <u>2 5 2 5</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.46 Nonpriority creditor's name and mailing address <u>Compass Bank</u> <u>Attn: Bankruptcy</u> <u>PO Box 10566</u> <u>Birmingham, AL 35296</u> Date or dates debt was incurred <u>1/1/2013</u> Last 4 digits of account number <u>3 5 4 4</u>	As of the petition filing date, the claim is: <u>\$0.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47 Nonpriority creditor's name and mailing address <u>Consolidated Communications</u> <u>P.O. Box 66523</u> <u>Saint Louis, MO 63166-6523</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>5 5 0 1</u>	As of the petition filing date, the claim is: <u>\$761.40</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48 Nonpriority creditor's name and mailing address <u>Cran, Debbie</u> <u>48 Post Shadown Estate Dr.</u> <u>Spring, TX 77389</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$35,000.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49 Nonpriority creditor's name and mailing address <u>Crossno, James</u> <u>1400 West Abram c/o Hill Gilstrap, PC</u> <u>Arlington, TX 76013</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Lawsuit pending	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50 Nonpriority creditor's name and mailing address <u>Dallas Avionics</u> <u>2525 Santa Anna Ave</u> <u>Dallas, TX 75228-1671</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,414.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.51 Nonpriority creditor's name and mailing address <u>Depot Avionics, Inc.</u> <u>2550 State Avenue</u> <u>Alamosa, CO 81101</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$19,580.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52 Nonpriority creditor's name and mailing address <u>Design Galveston</u> <u>2811 Inridge Dr.</u> <u>Austin, TX 78745</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$50.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53 Nonpriority creditor's name and mailing address <u>Discover Financial</u> <u>Attn: Bankruptcy Department</u> <u>PO Box 15316</u> <u>Wilmington, DE 19850-5316</u> Date or dates debt was incurred <u>11/1/1995</u> Last 4 digits of account number <u>5 7 3 3</u>	As of the petition filing date, the claim is: <u>\$15,506.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54 Nonpriority creditor's name and mailing address <u>Dyer, Scott</u> <u>2000 Old May Ct</u> <u>College Station, TX 77845</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,608.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55 Nonpriority creditor's name and mailing address <u>Edmo Distributors</u> <u>18230 E. Mirabeau Pkwy</u> <u>Spokane, WA 99216</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$33,333.48</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.56	Nonpriority creditor's name and mailing address <u>Entergy</u> <u>P.O. Box 8104</u> <u>Baton Rouge, LA 70891</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>9 6 7 2</u>	As of the petition filing date, the claim is: <u>\$559.64</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	Nonpriority creditor's name and mailing address <u>Fabian, Joseph</u> <u>P.O. Box 320639</u> <u>Flowood, MS 39232</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$99,564.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Nonpriority creditor's name and mailing address <u>Fillips, Robert</u> <u>435 FM 2917 Rd</u> <u>Alvin, TX 77511</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Nonpriority creditor's name and mailing address <u>Frager, David</u> <u>4016 Enclave Mesa Cir</u> <u>Austin, TX 78731</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$23,991.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60	Nonpriority creditor's name and mailing address <u>Frederick, Ben</u> <u>44 Beckonvale Ct</u> <u>The Woodlands, TX 77382-2652</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$22,901.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.61	Nonpriority creditor's name and mailing address <u>Galik, John G</u> <u>34 Greenview St</u> <u>Montgomery, TX 77356</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,461.35</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address <u>Galik, Kristin M</u> <u>34 Greenview St</u> <u>Montgomery, TX 77356</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,730.77</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address <u>Garmin</u> <u>1200 E. 151st Street</u> <u>Olathe, KS 66062</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$56,469.17</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address <u>Gene, John P</u> <u>305 Mockingbird Lane</u> <u>Weatherford, TX 76086</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,202.83</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address <u>General Aviation Services</u> <u>5260 Central PKWY, Hanger 14</u> <u>Conroe, TX 77303</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,540.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.66	Nonpriority creditor's name and mailing address <u>Genuine Aircraft Hardware</u> <u>4250 Aerotech Ctr Way, Unit B</u> <u>Paso Robles, CA 93446</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>T 0 0 8</u>	As of the petition filing date, the claim is: <u>\$601.84</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address <u>Gerthe, Christian D.F.</u> <u>24909 Stone Xing</u> <u>Montgomery, TX 77316</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,554.75</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address <u>Gerthe, Dieter HM</u> <u>24909 Stone Xing</u> <u>Montgomery, TX 77316</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,526.26</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.69	Nonpriority creditor's name and mailing address <u>Giese, Dave</u> <u>6110 Riverchase Trl</u> <u>Kingwood, TX 77345</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$44,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Nonpriority creditor's name and mailing address <u>GoDaddy</u> <u>14455 North Hayden Rd. 219</u> <u>Scottsdale, AZ 85260</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>9 5 4 0</u>	As of the petition filing date, the claim is: <u>\$1,277.92</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.71 Nonpriority creditor's name and mailing address <u>Gs Bank Usa</u> <u>Lockbox 6112</u> <u>Philadelphia, PA 19170</u> Date or dates debt was incurred <u>11/13/2019</u> Last 4 digits of account number <u>8 8 0 2</u>	As of the petition filing date, the claim is: <u>\$5,671.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72 Nonpriority creditor's name and mailing address <u>Guzman, Joe</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$25,799.40</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73 Nonpriority creditor's name and mailing address <u>Guzman, Joseph</u> <u>1400 West Abram c/o Hill Gilstrap PC</u> <u>Arlington, TX 76013</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Lawsuit pending	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74 Nonpriority creditor's name and mailing address <u>Hebert, Aaron</u> <u>5215 N Twin City Hwy</u> <u>Port Arthur, TX 77642</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$22,422.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75 Nonpriority creditor's name and mailing address <u>Hicks, Michael</u> <u>3306 Cunningham Rd</u> <u>Wallis, TX 77485</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$41,342.40</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.76	Nonpriority creditor's name and mailing address <u>High Desert Avionics</u> <u>4555-9 West G Ave</u> <u>Lancaster, CA 93536</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,494.17</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	Nonpriority creditor's name and mailing address <u>Hoffpauir, James</u> <u>P.O. Box 896</u> <u>Onalaska, TX 77360</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$15,212.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	Nonpriority creditor's name and mailing address <u>Holden, David W</u> <u>68 Rua Martine</u> <u>Miramar Beach, FL 32550</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$41,827.80</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Nonpriority creditor's name and mailing address <u>Holder, Barbara A</u> <u>12152 Ivy Drive</u> <u>Conroe, TX 77303</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,173.08</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	Nonpriority creditor's name and mailing address <u>Holder, Robert W</u> <u>12152 Ivy Drive</u> <u>Conroe, TX 77303</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,173.08</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.81	Nonpriority creditor's name and mailing address <u>Impress Computers</u> <u>21733 Provincial Blvd 110</u> <u>Katy, TX 77450</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$7,209.16</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.82	Nonpriority creditor's name and mailing address <u>Infante, Jon L</u> <u>988 Arbor Glen</u> <u>Conroe, TX 77303</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,187.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.83	Nonpriority creditor's name and mailing address <u>James, Patrick A</u> <u>12370 Ridgecrest</u> <u>Willis, TX 77318</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,585.66</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.84	Nonpriority creditor's name and mailing address <u>Johnson, Van</u> <u>27911 FM 2100 Rd</u> <u>Huffman, TX 77336</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$35,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.85	Nonpriority creditor's name and mailing address <u>JP Instruments, Inc</u> <u>3185-B Airway Avenue</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$900.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.86	Nonpriority creditor's name and mailing address <u>K&B Aviation GP LLC</u> <u>Attn: Brent Franks</u> <u>6609 Avenue U</u> <u>Houston, TX 77011</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$69,995.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Nonpriority creditor's name and mailing address <u>Keener, Steven D</u> <u>9782 West Shore Dr</u> <u>Willis, TX 77318</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,280.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	Nonpriority creditor's name and mailing address <u>Kelley, Larry</u> <u>7165 Royal Meadows St</u> <u>Port Arthur, TX 77642</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$11,088.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.89	Nonpriority creditor's name and mailing address <u>Lacock, Lucas D</u> <u>1923 W Welsford Dr</u> <u>Spring, TX 77386-2544</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,282.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.90	Nonpriority creditor's name and mailing address <u>Lauth, Andy</u> <u>10013 Military Dr</u> <u>Conroe, TX 77303</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$21,119.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.91 Nonpriority creditor's name and mailing address <u>Leofsky, Richard</u> <u>14100 Lakeport Dr</u> <u>Willis, TX 77318</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$66,922.40</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92 Nonpriority creditor's name and mailing address <u>LexisNexis</u> <u>RELX Inc. DBA LexisNexis</u> <u>PO Box 733106</u> <u>Dallas, TX 75373</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>P H 7 6</u> Remarks: Galik Law Firm	As of the petition filing date, the claim is: <u>\$390.43</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93 Nonpriority creditor's name and mailing address <u>Lexus Financial Services</u> <u>P.O. Box 4102</u> <u>Carol Stream, IL 60197-4102</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>T 4 2 9</u>	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94 Nonpriority creditor's name and mailing address <u>Limbaugh, Robert</u> <u>117 Fairhope Ave</u> <u>Fairhope, AL 36532</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$18,899.40</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.95 Nonpriority creditor's name and mailing address <u>Martin, Gary</u> <u>440 Forest Dr</u> <u>Lake Jackson, TX 77566</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$19,452.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.96	Nonpriority creditor's name and mailing address <u>Martin, Randy</u> <u>4973 Hilltop Ranch Ct</u> <u>Montgomery, TX 77316</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$25,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.97	Nonpriority creditor's name and mailing address <u>McCaskill, Sam</u> <u>P.O. Box 340339</u> <u>Austin, TX 78734</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$20,937.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98	Nonpriority creditor's name and mailing address <u>McDaniel, Joe</u> <u>6027 US Highway 259 N</u> <u>Henderson, TX 75652</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$80,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99	Nonpriority creditor's name and mailing address <u>McQuown, Todd</u> <u>108 Ebner Lake Front Dr</u> <u>Montgomery, TX 77316</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,135.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100	Nonpriority creditor's name and mailing address <u>Mid-Continent Instruments</u> <u>9400 E 34th Street North</u> <u>Wichita, KS 67226</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>0 4 3 7</u>	As of the petition filing date, the claim is: <u>\$2,548.33</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.101 Nonpriority creditor's name and mailing address <u>Montgomery County MUD #18</u> <u>P.O. Box 1170</u> <u>Montgomery, TX 77356</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>3 0 0 5</u>	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.102 Nonpriority creditor's name and mailing address <u>Mouser Electronics</u> <u>1000 North Main Street</u> <u>Mansfield, TX 76063</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>0 3 5 1</u>	As of the petition filing date, the claim is: <u>\$512.28</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103 Nonpriority creditor's name and mailing address <u>Murphy, David</u> <u>19606 Powerscourt Dr</u> <u>Humble, TX 77346</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$35,045.40</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.104 Nonpriority creditor's name and mailing address <u>MW Aircraft Services</u> <u>10298 C Pickerings Mem Dr</u> <u>Conroe, TX 77303</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$34,353.37</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.105 Nonpriority creditor's name and mailing address <u>Navient</u> <u>Attn: Bankruptcy</u> <u>PO Box 9000</u> <u>Wiles-Barr, PA 18773-9000</u> Date or dates debt was incurred <u>1/1/2001</u> Last 4 digits of account number <u>0 1 3 1</u>	As of the petition filing date, the claim is: <u>\$25,887.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.106	Nonpriority creditor's name and mailing address <u>Nelnet</u> <u>Attn: Bankruptcy Claims</u> <u>PO Box 82505</u> <u>Lincoln, NE 68501-2505</u> Date or dates debt was incurred <u>6/1/2005</u> Last 4 digits of account number <u>7 1 9 9</u>	As of the petition filing date, the claim is: <u>\$29,634.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107	Nonpriority creditor's name and mailing address <u>Osterhus, Doug</u> <u>P.O. Box 72</u> <u>Bellaire, TX 77402</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$36,240.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	Nonpriority creditor's name and mailing address <u>Pearsall, Mason</u> <u>12507 Telge Road</u> <u>Cypress, TX 77429</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,995.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	Nonpriority creditor's name and mailing address <u>Pitney Bowes</u> <u>3001 Summer St</u> <u>Stamford, CT 06905-4317</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>6 5 4 1</u>	As of the petition filing date, the claim is: <u>\$100.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110	Nonpriority creditor's name and mailing address <u>Plane Den Aircraft Structures, LLC</u> <u>1137 Brecon Lane</u> <u>Austin, TX 78748</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,942.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.111	Nonpriority creditor's name and mailing address <u>Pool Tec Pool & Spa</u> <u>17118 Grey Oaks Dr</u> <u>Conroe, TX 77385</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.112	Nonpriority creditor's name and mailing address <u>Probst, Adam R</u> <u>265 Thunderbird Dr</u> <u>Conroe, TX 77304</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,537.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.113	Nonpriority creditor's name and mailing address <u>Putz Jr, Robert H</u> <u>3306 Durant Ct</u> <u>Bryan, TX 77802</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,628.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.114	Nonpriority creditor's name and mailing address <u>Rance, Cory</u> <u>12071 S Whitehall Rd</u> <u>Moody, TX 76557</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$21,068.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.115	Nonpriority creditor's name and mailing address <u>Rance, Cory</u> <u>1400 West Abram c/o Hill Gilstrap, PC</u> <u>Arlington, TX 76013</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Lawsuit pending	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.116	Nonpriority creditor's name and mailing address <u>Roberston, Thomas A</u> <u>311 Elkins Lake</u> <u>Huntsville, TX 77340</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$800.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117	Nonpriority creditor's name and mailing address <u>Robinson, Joey and Casey</u> <u>311 Elkins Lane</u> <u>Huntsville, TX 77340</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$12,522.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.118	Nonpriority creditor's name and mailing address <u>Schultz, Daniel</u> <u>16192 Coastal Hwy</u> <u>Lewes, DE 19958-3608</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$8,172.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.119	Nonpriority creditor's name and mailing address <u>Security Service FCU</u> <u>Risk Management</u> <u>PO Box 691586</u> <u>San Antonio, TX 78269</u> Date or dates debt was incurred <u>10/1/2006</u> Last 4 digits of account number <u>2 0 2 0</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.120	Nonpriority creditor's name and mailing address <u>Seiler Mitby, PLLC</u> <u>Attn: Kenna Seiler</u> <u>2700 Research Forrest Dr 100</u> <u>Spring, TX 77381</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,425.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.121	Nonpriority creditor's name and mailing address <u>Sindhu, Azhar</u> <u>19123 Aquatic Dr</u> <u>Humble, TX 77346</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,848.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address <u>Snap On Crdt</u> <u>950 Technology Way Suite 301</u> <u>Libertyville, IL 60048</u> Date or dates debt was incurred <u>8/4/2005</u> Last 4 digits of account number <u>3 8 2 5</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address <u>Souders, Steve</u> <u>37703 Parkway Oaks</u> <u>Magnolia, TX 77355</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$12,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.124	Nonpriority creditor's name and mailing address <u>Synchrony Bank/Care Credit</u> <u>Attn: Bankruptcy Dept</u> <u>PO Box 965064</u> <u>Orlando, FL 32896-5060</u> Date or dates debt was incurred <u>5/1/2017</u> Last 4 digits of account number <u>4 4 1 7</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.125	Nonpriority creditor's name and mailing address <u>Tachus</u> <u>2407 Timberloch Place G</u> <u>Spring, TX 77389</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

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Part 2: Additional Page

3.126 Nonpriority creditor's name and mailing address <u>Texas Aircraft Instruments</u> <u>1911 South Gordon Street</u> <u>Alvin, TX 77511</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$951.09</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.127 Nonpriority creditor's name and mailing address <u>Textron Aviation</u> <u>23260 Newark Place</u> <u>Chicago, IL</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>0 9 4 6</u>	As of the petition filing date, the claim is: <u>\$11,453.19</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.128 Nonpriority creditor's name and mailing address <u>Toyota Financial Services</u> <u>Attn: Bankruptcy</u> <u>PO Box 8026</u> <u>Cedar Rapids, IA 52409-8026</u> Date or dates debt was incurred <u>5/1/2019</u> Last 4 digits of account number <u>T 4 2 9</u>	As of the petition filing date, the claim is: <u>\$30,778.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.129 Nonpriority creditor's name and mailing address <u>Toyota Financial Services</u> <u>Attn: Bankruptcy</u> <u>PO Box 8026</u> <u>Cedar Rapids, IA 52409-8026</u> Date or dates debt was incurred <u>12/1/2016</u> Last 4 digits of account number <u>W 7 2 9</u>	As of the petition filing date, the claim is: <u>\$0.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.130 Nonpriority creditor's name and mailing address <u>Tuggle, John</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: OutRight Avionics Customer Deposit	As of the petition filing date, the claim is: <u>\$10,888.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.131 Nonpriority creditor's name and mailing address <u>UPS</u> <u>P.O. Box 7247-0244</u> <u>Philadelphia, PA 19170</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>1 8 7 W</u>	As of the petition filing date, the claim is: <u>\$357.08</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.132 Nonpriority creditor's name and mailing address <u>USAA Federal Savings Bank</u> <u>Attn: Bankruptcy</u> <u>10750 McDermott Freeway</u> <u>San Antonio,, TX 78288-9876</u> Date or dates debt was incurred <u>8/1/1995</u> Last 4 digits of account number <u>3 8 3 6</u>	As of the petition filing date, the claim is: <u>\$18,871.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133 Nonpriority creditor's name and mailing address <u>USAA Property and Casualty</u> <u>10750 McDermott Fwy</u> <u>San Antonio, TX 78288-0570</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>5 6 2 8</u>	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.134 Nonpriority creditor's name and mailing address <u>Van Bortel Aircraft, Inc</u> <u>4912 S Collins St</u> <u>Arlington, TX 76016</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,738.75</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.135 Nonpriority creditor's name and mailing address <u>Venteicher, Gerry</u> <u>121 Southwood Dr</u> <u>Bossier City, LA 71111-6050</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$8,397.00</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.136	Nonpriority creditor's name and mailing address <u>Verizon Wireless</u> <u>PO Box 489</u> <u>Newark, NJ 07101</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>0 0 0 1</u>	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.137	Nonpriority creditor's name and mailing address <u>Vineyard, David</u> <u>324 Burrows St</u> <u>Nacogdoches, TX 75965</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$4,428.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.138	Nonpriority creditor's name and mailing address <u>Vivent-Security System</u> <u>62992 Collections Dr</u> <u>Chicago, IL 60693-0629</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.139	Nonpriority creditor's name and mailing address <u>VNE Aviation, LLC</u> <u>Attn: Michael Wise</u> <u>675 Clear Springs Hollow</u> <u>Buda, TX 78610</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$35,699.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.140	Nonpriority creditor's name and mailing address <u>Volkswagen Credit, Inc</u> <u>Attn: Bankruptcy</u> <u>PO Box 3</u> <u>Hillboro, OR 97123-0003</u> Date or dates debt was incurred <u>9/1/2008</u> Last 4 digits of account number <u>6 7 6 8</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.141	Nonpriority creditor's name and mailing address <u>Walker, George</u> <u>12412 Sagittarius Dr E</u> <u>Willis, TX 77318</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$54,824.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.142	Nonpriority creditor's name and mailing address <u>Walker, George</u> <u>c/o Hill Gilstrap, PC</u> <u>Arlington, TX 76013</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Lawsuit pending	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.143	Nonpriority creditor's name and mailing address <u>Watchdog Security</u> <u>330 Rayford Rd. 207</u> <u>Spring, TX 77386</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$178.58</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.144	Nonpriority creditor's name and mailing address <u>Webber, Bruce</u> <u>201 Stearman Dr</u> <u>Georgetown, TX 78628</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$20,655.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.145	Nonpriority creditor's name and mailing address <u>Wells Fargo Bank</u> <u>Attn: Written Correspondence Dept</u> <u>PO Box 10335</u> <u>Des Moines, IA 50306</u> Date or dates debt was incurred <u>9/1/2007</u> Last 4 digits of account number <u>0 0 0 1</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

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3.146	Nonpriority creditor's name and mailing address <u>Wells Fargo Bank NA</u> Attn: Bankruptcy <u>1 Home Campus MAC X2303-01A</u> <u>Des Moines, IA 50328</u> Date or dates debt was incurred <u>8/1/2014</u> Last 4 digits of account number <u>3 8 6 7</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.147	Nonpriority creditor's name and mailing address <u>Wells Fargo Bank NA</u> Attn: Bankruptcy <u>1 Home Campus MAC X2303-01A</u> <u>Des Moines, IA 50328</u> Date or dates debt was incurred <u>5/2/2008</u> Last 4 digits of account number <u>6 7 6 5</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.148	Nonpriority creditor's name and mailing address <u>Wf/gallery</u> <u>Po Box 14517</u> <u>Des Moines, IA 50306</u> Date or dates debt was incurred <u>5/1/2017</u> Last 4 digits of account number <u>6 1 4 1</u>	As of the petition filing date, the claim is: <u>\$4,121.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.149	Nonpriority creditor's name and mailing address <u>Wf/gallery</u> <u>Po Box 14517</u> <u>Des Moines, IA 50306</u> Date or dates debt was incurred <u>5/1/2017</u> Last 4 digits of account number <u>6 1 3 3</u>	As of the petition filing date, the claim is: <u>\$7,699.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.150	Nonpriority creditor's name and mailing address <u>Wf/matfirm</u> <u>Po Box 14517</u> <u>Des Moines, IA 50306</u> Date or dates debt was incurred <u>8/30/2015</u> Last 4 digits of account number <u>0 7 1 5</u>	As of the petition filing date, the claim is: <u>\$0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: Additional Page

3.151 Nonpriority creditor's name and mailing address <u>Wheless, Ryan</u> <u>13810 Champion Forest Dr 02</u> <u>Houston, TX 77069</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$9,284.45</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.152 Nonpriority creditor's name and mailing address <u>WireMasters</u> <u>P.O. Box 734418</u> <u>Chicago, IL 60673</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>2 3 7 8</u>	As of the petition filing date, the claim is: <u>\$9,770.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.153 Nonpriority creditor's name and mailing address <u>Wootton, Don</u> <u>22606 Main Blvd #1</u> <u>Tomball, TX 77377</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$20,549.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.154 Nonpriority creditor's name and mailing address <u>Xylon Aviation LLC</u> <u>1050 Bentwater Dr.</u> <u>Montgomery, TX 77356</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts**

5a. Total claims from Part 1	5a.	<u>\$82,961.54</u>
5b. Total claims from Part 2	5b. +	<u>\$1,971,797.47</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	<u>\$2,054,759.01</u>

Fill in this information to identify the case:

Debtor name OutRight Avionics, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston DivisionCase number (if known): _____ Chapter 7☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.**

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1	State what the contract or lease is for and the nature of the debtor's interest <u>Office/Shop Lease</u> <u>Contract to be REJECTED</u>	<u>Xylon Aviation LLC</u> <u>1050 Bentwater Dr.</u> <u>Montgomery, TX 77356</u>
	State the term remaining <u>24 months</u>	
	List the contract number of any government contract _____	
2.2	State what the contract or lease is for and the nature of the debtor's interest _____ _____	_____ _____
	State the term remaining _____	_____ _____
	List the contract number of any government contract _____	_____ _____
2.3	State what the contract or lease is for and the nature of the debtor's interest _____ _____	_____ _____
	State the term remaining _____	_____ _____
	List the contract number of any government contract _____	_____ _____
2.4	State what the contract or lease is for and the nature of the debtor's interest _____ _____	_____ _____
	State the term remaining _____	_____ _____
	List the contract number of any government contract _____	_____ _____
2.5	State what the contract or lease is for and the nature of the debtor's interest _____ _____	_____ _____
	State the term remaining _____	_____ _____
	List the contract number of any government contract _____	_____ _____

Fill in this information to identify the case:

Debtor name OutRight Avionics, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Galik, John G34 Greenview St
StreetMontgomery, TX 77356

City

State

ZIP Code

Allegiance Bank☒ D☐ E/F☐ GAllegiance Bank☒ D☐ E/F☐ GPlains State Bank☒ D☐ E/F☐ GSecurity Bank Crawford☒ D☐ E/F☐ GByrd Jr, Jerome☒ D☐ E/F☐ GBall, Tom☒ D☐ E/F☐ GKabbage/Celtic Bank☒ D☐ E/F☐ GOnDeck Capital, Inc.☒ D☐ E/F☐ G

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor**Column 2: Creditor**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing Address	Name	Check all schedules that apply:
2.2 <u>Galik, Kristin Michelle</u>	<u>34 Greenview Street</u> Street <u>Montgomery, TX 77356</u> City State ZIP Code	<u>Byrd Jr, Jerome</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 <u>Galik, Kristin M</u>	<u>34 Greenview St</u> Street <u>Montgomery, TX 77356</u> City State ZIP Code	<u>Allegiance Bank</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		<u>Allegiance Bank</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		<u>Plains State Bank</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		<u>Security Bank Crawford</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		<u>Ball, Tom</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		<u>Kabbage/Celtic Bank</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		<u>OnDeck Capital, Inc.</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor OutRight Avionics, LLC
 Name _____

Case number (if known) _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules
that apply:

2.4 _____
 Street _____

City _____ State _____ ZIP Code _____

2.5 _____
 Street _____

City _____ State _____ ZIP Code _____

2.6 _____
 Street _____

City _____ State _____ ZIP Code _____

Fill in this information to identify the case:

Debtor name OutRight Avionics, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston DivisionCase number (if known): _____ Chapter 7☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real Property:**Copy line 88 from *Schedule A/B*.....\$0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*.....\$1,375,780.78**1c. Total of all property:**Copy line 92 from *Schedule A/B*.....\$1,375,780.78**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....\$1,444,314.51**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....\$82,961.54**3b. Total amount of claims of non-priority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....**+** \$1,971,797.47**4. Total liabilities**.....

Lines 2 + 3a + 3b

\$3,499,073.52

Fill in this information to identify the case:

Debtor name OutRight Avionics, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy** **04/19****The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).****Part 1: Income****1. Gross revenue from business**☐ None**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****Sources of revenue**

Check all that apply

Gross revenue

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:From 01/01/2020 to Filing date
MM/ DD/ YYYY☒ Operating a business\$724,024.03☐ Other _____**For prior year:**From 01/01/2019 to 12/31/2019
MM/ DD/ YYYY MM/ DD/ YYYY☒ Operating a business\$2,580,650.76☐ Other _____**For the year before that:**From 01/01/2018 to 12/31/2018
MM/ DD/ YYYY MM/ DD/ YYYY☒ Operating a business\$2,596,229.69☐ Other _____**2. Non-business revenue**Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.☒ None**Description of sources of revenue****Gross revenue from each source**

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:From 01/01/2020 to Filing date
MM/ DD/ YYYY**For prior year:**From 01/01/2019 to 12/31/2019
MM/ DD/ YYYY MM/ DD/ YYYY**For the year before that:**From 01/01/2018 to 12/31/2018
MM/ DD/ YYYY MM/ DD/ YYYY

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Part 2: List Certain Transfers Made Before Filing for Bankruptcy**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <u>Aircraft Spruce & Specialty</u> Creditor's name <u>225 Airport Circle</u> Street <u>Corona, CA 92878</u> City State ZIP Code		\$22,149.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. <u>Allegiance Bank</u> Creditor's name <u>8727 W. Sam Houston Parkway N. Suite 100</u> Street <u>Houston, TX 77040</u> City State ZIP Code		\$40,001.78	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. <u>Aviall/Boeing Company</u> Creditor's name <u>PO Box 619048</u> Street <u>Dallas, TX 75261</u> City State ZIP Code		\$27,395.40	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.4. <u>Avidyne</u> Creditor's name Street City State ZIP Code		\$5,410.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.5. <u>Blue Cross Blue Shield</u> Creditor's name Street City State ZIP Code		\$12,259.68	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

3.6. Coats & Evans, PC _____ \$17,165.00
Creditor's name _____

Street _____

P.O. Box 130246 _____

Spring, TX 77393 _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☒ Services

☐ Other _____

3.7. Dallas Avionics _____ \$4,267.16
Creditor's name _____

2525 Santa Anna Ave _____
Street _____

Dallas, TX 75228-1671 _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☒ Suppliers or vendors

☐ Services

☐ Other _____

3.8. Elliott Aviation _____ \$11,000.00
Creditor's name _____

Street _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☒ Suppliers or vendors

☐ Services

☐ Other _____

3.9. Garmin _____ \$210,000.00
Creditor's name _____

1200 E. 151st Street _____
Street _____

Olathe, KS 66062 _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☒ Suppliers or vendors

☐ Services

☐ Other _____

3.10. General Avionics _____ \$12,511.84
Creditor's name _____

Street _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☒ Suppliers or vendors

☐ Services

☐ Other _____

3.11. Greatland Holdings _____ \$5,400.00
Creditor's name _____

Street _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☒ Suppliers or vendors

☐ Services

☐ Other _____

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

3.12. IPFS _____ \$5,016.04

Creditor's name _____

Street _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☒ Services

☐ Other _____

3.13. Mid-Continent Instruments _____ \$8,480.97

Creditor's name _____

9400 E 34th Street North
Street _____

Wichita, KS 67226
City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☒ Suppliers or vendors

☐ Services

☐ Other _____

3.14. Nason Associates _____ \$6,174.00

Creditor's name _____

Street _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☒ Services

☐ Other _____

3.15. Schnur, Peter _____ \$6,651.00

Creditor's name _____

Street _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☒ Other Refund

3.16. Plains State Bank _____ \$4,217.86

Creditor's name _____

PO Box 62005
Street _____

Houston, TX 77205
City _____ State _____ ZIP Code _____

☒ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☐ Other _____

3.17. Tate, Richard _____ \$7,500.00

Creditor's name _____

Street _____

City _____ State _____ ZIP Code _____

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☒ Services

☐ Other _____

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

3.18. Anderson, Roy _____ \$172,432.00

Creditor's name

4900 Courthouse Rd

Street

Gulfport, MS 39507

City

State

ZIP Code

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☒ Other Refund

3.19. Security Bank Crawford _____ \$67,301.78

Creditor's name

PO Box 90

Street

Crawford, TX 76638

City

State

ZIP Code

☒ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☐ Other _____

3.20. Texas Comptroller of Public Accounts _____ \$10,916.86

Creditor's name

111 East 17th Street

Street

Austin, TX 78774

City

State

ZIP Code

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☒ Other taxes

3.21. Ratcliff, Steve _____ \$8,900.00

Creditor's name

Street

City

State

ZIP Code

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☒ Other Refund

3.22. Internal Revenue Service _____ \$3,418.00

Creditor's name

1919 Smith St., Stop 5022 HOU

Street

Insolvency Section

Houston, TX 77002

City

State

ZIP Code

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☒ Other taxes

3.23. Xylon Aviation LLC _____ \$64,003.87

Creditor's name

1050 Bentwater Dr.

Street

Montgomery, TX 77356

City

State

ZIP Code

☐ Secured debt

☐ Unsecured loan repayments

☐ Suppliers or vendors

☐ Services

☒ Other Lease

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. _____ Creditor's name	_____	_____	_____
_____	_____	_____	_____
Street	_____	_____	_____
_____	_____	_____	_____
City State ZIP Code	_____	_____	_____
Relationship to debtor	_____	_____	_____
_____	_____	_____	_____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Description of the property	Date	Value of property
5.1. _____ Creditor's name	_____	_____	_____
_____	_____	_____	_____
Street	_____	_____	_____
_____	_____	_____	_____
City State ZIP Code	_____	_____	_____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
5.1. <u>Plains State Bank</u> Creditor's name	<u>Set off after garnishment served.</u>	<u>3/17/2020</u>	<u>\$26,375.59</u>
<u>PO Box 62005</u> Street	XXXX- ____ - ____ - ____	_____	_____
_____	_____	_____	_____
<u>Houston, TX 77205</u> City State ZIP Code	_____	_____	_____

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity —within 1 year before filing this case.

☐ None

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

7.1.	Case title	Nature of case	Court or agency's name and address	Status of case
	<u>See attached</u>		<u>See attached</u>	<input checked="" type="checkbox"/> Pending
			Name	<input type="checkbox"/> On appeal
	Case number		Street	<input type="checkbox"/> Concluded
			City	
			State	
			ZIP Code	

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

8.1.	Custodian's name and address	Description of the property	Value
	<u>Custodian's name</u>		
	<u>Street</u>	Case title	Court name and address
			Name
	<u>City</u> <u>State</u> <u>ZIP Code</u>	Case number	Street
		Date of order or assignment	City
			State
			ZIP Code

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

9.1.	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
	<u>Cy Fair Intruders</u>		<u>8/15/19, 10/6/19,</u>	<u>\$2,024.99</u>
	Recipient's name		10/18/19	
	<u>Street</u>			
	<u>City</u> <u>State</u> <u>ZIP Code</u>			
	Recipient's relationship to debtor			
	<u>Daughter's Softball TEam</u>			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Description of the property lost and how the loss occurred**Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (*Schedule A/B: Assets – Real and Personal Property*).**Date of loss****Value of property lost**

10.1. _____

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

11.1.

Who was paid or who received the transfer?**If not money, describe any property transferred****Dates****Total amount or value**Byman & Associates, PLLCAttorney's Fee4/3/2020\$7,500.00**Address**7924 Broadway Suite 104

Street

Pearland, TX 77581

City

State

ZIP Code

Email or website address**Who made the payment, if not debtor?**Debtor**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

12.1.

Name of trust or device**Describe any property transferred****Dates transfers were made****Total amount or value****Trustee**

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

13.1.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	<div>Address</div> <div>Street</div> <div>City State ZIP Code</div> <div>Relationship to debtor</div>			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

14.1.	Address	Dates of occupancy
	<div>Street</div> <div>City State ZIP Code</div>	From _____ To _____

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:
 —diagnosing or treating injury, deformity, or disease, or
 —providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

Facility name and address		Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. _____ Facility name			
_____ Street		Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
City	State		
_____		_____	
_____		_____	

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

☐ No☐ Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☒ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?☐ No. Go to Part 10.☐ Yes. Fill in below:

Name of plan	Employer identification number of the plan
_____	EIN: ____ - ____ - ____ - ____ - ____

Has the plan been terminated?

☐ No☐ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

18.1 _____ XXXX- ____ - ____ - ____
 Name

 Street

 City State ZIP Code

☐ Checking
☐ Savings
☐ Money market
☐ Brokerage
☐ Other

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

19.1	Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name	_____	_____	<input type="checkbox"/> No
	Street	_____	_____	<input type="checkbox"/> Yes
	_____	_____	_____	
	City State ZIP Code	Address	_____	
		_____	_____	

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name	_____	_____	<input type="checkbox"/> No
	Street	_____	_____	<input type="checkbox"/> Yes
	_____	_____	_____	
	City State ZIP Code	Address	_____	
		_____	_____	

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

Owner's name and address	Location of the property	Description of the property	Value
Various Name		Various parts held on consignment for customers on a 70/30 agreement	\$63,735.00
Street			
City State ZIP Code			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?**

Include settlements and orders.

☒ No☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
	Name		<input type="checkbox"/> Pending
Case number	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?☒ No☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

24. Has the debtor notified any governmental unit of any release of hazardous material?☒ No☐ Yes. Provide details below.

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

Site name and address**Governmental unit name and address****Environmental law, if known****Date of notice**

Name

Name

Street

Street

City State ZIP Code

City State ZIP Code

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None**Business name and address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

25.1.

Name

EIN: _____

Street

Dates business existed

From _____ To _____

City State ZIP Code

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Dates of service**

26a.1.

Barbara Holder

From _____ To _____

Name

1512 Ivy Dr.

Street

Conroe, TX 77303

City

State

ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Debtor OutRight Avionics, LLC
Name

Case number (if known) _____

Name and address

Dates of service

26b.1. ABS Bookkeeping & Tax Service, Inc. From 5/2015 To present
Name
1002 E. Elms Rd. Suite 111
Street
Killeen, TX 76542
City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. Galik, John G
Name
34 Greenview St
Street
Montgomery, TX 77356
City State ZIP Code

Name and address

If any books of account and records are unavailable, explain why

26c.2. Galik, Kristin M
Name
34 Greenview St
Street
Montgomery, TX 77356
City State ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

26d.1. _____
Name

Street

City State ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Name of the person who supervised the taking of the inventory

Date of
inventoryThe dollar amount and basis (cost, market, or
other basis) of each inventory

Name and address of the person who has possession of inventory records

27.1.

Name _____

Street _____

City _____

State _____

ZIP Code _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<u>Galik, John G</u>	<u>34 Greenview St Montgomery, TX 77356</u>	<u>Member/General Manager,</u>	<u>51.00 %</u>
<u>Galik, Kristin M</u>	<u>34 Greenview St Montgomery, TX 77356</u>	<u>Member,</u>	<u>49.00 %</u>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
------	---------	-------------------------------------	---

From _____
To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. <u>Galik, John G</u> Name <u>34 Greenview St</u> Street <u>Montgomery, TX 77356</u> City State ZIP Code	<u>\$3,461 gross per pay period</u>	<u>Various over last 1 year</u>	<u>Salary</u>
Relationship to debtor <u>Owner/President</u>			

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.2. <u>Galik, Kristin M</u> Name <u>34 Greenview St</u> Street <u>Montgomery, TX 77356</u> City State ZIP Code	<u>\$1,730.77 per pay period</u>	<u>Various</u>	<u>Salary</u>

Relationship to debtorCo-Owner, General Counsel, Vice President

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.3. <u>Galik, John G</u> Name <u>34 Greenview St</u> Street <u>Montgomery, TX 77356</u> City State ZIP Code	<u>\$61,804.77</u>	<u>Various</u>	<u>Owner Draws to John and Kristin Galik (for mortgage payments and personal expenses in lieu of market rate salary)</u>

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
_____	EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
_____	EIN: _____

Part 14: Signature and Declaration

Debtor OutRight Avionics, LLC
Name _____

Case number (if known) _____

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/07/2020
MM/ DD/ YYYY

X _____
/s/ John Galik
Signature of individual signing on behalf of the debtor

Position or relationship to debtor

President

Printed name _____ John Galik

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No
☐ Yes

LAWSUITS

Case Name: Security Bank of Crawford v. OutRight Avionics, LLC, A Texas Limited Liability Company, Kristin M Galik, and John Galik

Case No.: 2019-270-4

Court Name: 170th Judicial District of McLennan County, Texas

Address: 501 Washington Avenue, Suite 211, Waco, TX 76701

Status Concluded

Nature of the Case: **Suit on Note for OutRight Avionics, LLC - OutRight Avionics renegotiated the loan**

Case Name: Michael Joseph and Flying Barefoot Ranch, LLC v. John Galik and OutRight Avionics, LLC

Case No.: 19 DCV 262258

Court Name: 240th Judicial District, Fort Bend County, Texas

Address: 301 Jackson Street, Richmond, TX 77469

Status Concluded

Nature of the Case: **He wanted OutRight Avionics to sell his used equipment and then thought it was worth a whole lot more.**

Case Name: James Crossno v. OutRight Avionics, LLC, John Galik and Garmin USA, Inc.

Case No.: 19-10-13614

Court Name: 410th Judicial District, Montgomery County, Texas

Address: 301 North Main, Suite 214 Conroe, Texas 77301

Status Concluded

Nature of the case: **Wanted his deposit back from OutRight Avionics, LLC, which he received within 10 days of request. Filed lawsuit prior to demand.**

Case Name: Tom Ball v. OutRight Avionics, LLC

Case No.: 18-12-16189

Court Name: 284th Judicial District, Montgomery County, Texas

Address: 301 North Main, Suite 214 Conroe, Texas 77301

Status Disposed

Nature of the case: **Suit on Note from OutRight Avionics, LLC**

Case Name: OutRight Avionics, LLC v. Tom Ball

Case No.: 19-03-03966

Court Name: 284th Judicial District, Montgomery County, Texas

Address: 301 North Main, Suite 214 Conroe, Texas 77301

Status Disposed

Nature of the case: **Suit on Note from OutRight Avionics, LLC**

Case Name: Tom Ball/ Garnishor v. Plains State Bank, Garnishee, OutRight Avionics, LLC

Case No.: 20-03-03781

Court Name: 284th Judicial District, Montgomery County, Texas

Address: 301 North Main, Suite 214 Conroe, Texas 77301

Status Disposed

Nature of the case: **Suit on Note from OutRight Avionics, LLC**

Case Name: Tom Ball/ Garnishor v. JP Morgan Chase National Association, Garnishee, OutRight Avionics, LLC

Case No.: 20-03-03782

Court Name: 284th Judicial District, Montgomery County, Texas

Address: 301 North Main, Suite 214 Conroe, Texas 77301

Status Pending

Nature of the case: **Suit on Note from OutRight Avionics, LLC**

Case Name: OutRight Avionics, LLC v. Eric Spain, Spain Aviation, LLC

Case No.: 20-03-03679

Court Name: 284th Judicial District, Montgomery County, Texas

Address: 301 North Main, Suite 214 Conroe, Texas 77301

Status Pending

Nature of the case: **Suit on Note from OutRight Avionics, LLC**

Case Name: James Crossno, Cory Rance, George Walker, Joseph Gusman v. OutRight Avionics, LLC, John Galik and Garmin USA

Case No.: 20-03-04081

Court Name: 20-03-03679

Address: 301 North Main, Suite 214 Conroe, Texas 77301

Status Not Served

Nature of the case: **Suit on Note from OutRight Avionics, LLC**

B2030 (Form 2030)(12/15)

United States Bankruptcy Court

Southern District of Texas

In re

OutRight Avionics, LLC

Debtor(s)

Case No. _____

Chapter 7**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$7,500.00
Prior to the filing of this statement I have received	\$7,500.00
Balance Due	\$0.00

2. The source of the compensation to be paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation in any adversary proceeding filed against you in your chapter 7 proceeding. Representation in any contested matter filed by you or against you in your chapter 7 proceeding, including but not limited to 2004 notices, 2004 examinations, Motions for Relief under section 362, Motion to Dismiss under section 707 or otherwise, and Motions to Convert. Representation of you in any of these proceedings may be available on an hourly basis (or contingent fee) and a separate fee agreement must be executed for such representation.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/07/2020

Date

/s/ Allison D. Byman

Signature of Attorney

Allison D. Byman
Bar Number: 24040773
Byman & Associates, PLLC
7924 Broadway Suite 104
Pearland, TX 77581
Phone: (281) 884-9269

Byman & Associates, PLLC

Name of law firm

**IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE: **OutRight Avionics, LLC**

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 04/07/2020 Signature /s/ John Galik
John Galik, President

Air Capital Dial, Inc.
220 N. Vine
Wichita, KS 67203

Aircraft Spruce & Specialty
225 Airport Circle
Corona, CA 92878

Alamo Plating & Metal Finish
9230 Converse Business Ln.
Converse, TX 78109

Allegiance Bank
8727 W. Sam Houston Parkway N. Suite
100
Houston, TX 77040

Allied Electronics
7151 Jack Newell Blvd. S
Fort Worth, TX 76118

Jose A Amador
19603 Swan Valley Dr
Cypress, TX 77433

American Express
P.O. Box 650448
Dallas, TX 75265

Amex
Correspondence/Bankruptcy
PO Box 981540
El Paso, TX 79998-1540

Kris Anantasomboon
705 Glaze Circle
Hewitt, TX 76643

Roy Anderson
4900 Courthouse Rd
Gulfport, MS 39507

Apple Card
P.O. Box 7247
Philadelphia, PA 19170

Carlos Arana
15 Split Rail Pl
Spring, TX 77382

Aspen Avionics
5001 Indian School Road, NE
Albuquerque, NM 87110

Associated Aircraft Supply,
LLC
3250 Stone Myers Parkway
Grapevine, TX 76051

AT&T

Aviall/Boeing Company
PO Box 619048
Dallas, TX 75261

Tom Ball
222 Club Island Way
Montgomery, TX 77356

Bank of America
PO Box 851001
Dallas, TX 75285-1001

Jason Beaver
950 Seven Hills Dr 1124
Henderson, NV 89052

Chuck Beecher
4230 SE King Rd Unit 365
Portland, OR 97222

Bentwater Yacht and Country
Club
800 Bentwater Dr
Montgomery, TX 77356-8256

Josh Berman
14119 Renee Lane
College Station, TX 77845

BHE & Associates Ltd.
12002 Warfield St Ste 250
San Antonio, TX 78216-3219

Al Bledsoe
1201 The Cape Rd
Horseshoe Bay, TX 78657

Boxwell Avionics
3050 Airman Dr.
Fort Pierce, FL 34946

Christopher S Brandley
12370 Ridgecrest
Willis, TX 77318

Neal Bridges
15421 Highway 12
Orange, TX 77632

Robert M Briscoe
4401 Gibson St
Houston, TX 77007

Stefan Buca
1024 N Oak Cliff Blvd
Dallas, TX 75208

Jerome Byrd, Jr
3307 Courtland Manor Lane
Kingwood, TX 77339

Cal America Mobil
4145 Belt Line Rd # 212-247
Addison, TX 75001-4324

Capital One
Attn: Bankruptcy
PO Box 30285
Salt Lake City, UT 84130-0285

Paul Carper
10070 Airport Road
Conroe, TX 77303

Steve Cary
4320 Brownstone Dr
Beaumont, TX 77706

Castleberry Instruments
13405 Immanuel Rd Ste 1a
Pflugerville, TX 78660-8338

Dave Catalani
234 Tortoisde Creek Pl
Spring, TX 77389

Centerpoint
P.O. Box 4981
Houston, TX 77210-4981

Century Flight Systems, Inc.
Po Box 610
Mineral Wells, TX 76068-0610

Ces/clsf
C/o Acs
Utica, NY 13501

Chase Card Services
Attn: Bankruptcy
PO Box 15298
Wilmington, DE 19850

Chase Card Services
PO Box 15123
Wilmington, DE 19850

City of Conroe
Alarms Division
PO Box 140875
Irving, TX 75014

City of Conroe
Water Department
PO Box 1669
Houston, TX 77251

Clean Planes "R" Us

Coats & Evans, PC
Attn: Gary L Evans
P.O. Box 130246
Spring, TX 77393

John Cohron
20630 Sundance Springs Ln
Spring, TX 77379

Comenity Bank/Jared
Attn: Bankruptcy
PO Box 182273
Columbus, OH 43218

Compass Bank
Attn: Bankruptcy
PO Box 10566
Birmingham, AL 35296

Consolidated Communications
P.O. Box 66523
Saint Louis, MO 63166-6523

Debbie Cran
48 Post Shadown Estate Dr.
Spring, TX 77389

James Crossno
1400 West Abram c/o Hill Gilstrap, PC
Arlington, TX 76013

Dallas Avionics
2525 Santa Anna Ave
Dallas, TX 75228-1671

Depot Avionics, Inc.
2550 State Avenue
Alamosa, CO 81101

Design Galveston
2811 Inridge Dr.
Austin, TX 78745

Discover Financial
Attn: Bankruptcy Department
PO Box 15316
Wilmington, DE 19850-5316

Scott Dyer
2000 Old May Ct
College Station, TX 77845

Edmo Distributors
18230 E. Mirabeau Pkwy
Spokane, WA 99216

Entergy
P.O Box 8104
Baton Rouge, LA 70891

Joseph Fabian
P.O. Box 320639
Flowood, MS 39232

Robert Fillips
435 FM 2917 Rd
Alvin, TX 77511

David Frager
4016 Enclave Mesa Cir
Austin, TX 78731

Ben Frederick
44 Beckonvale Ct
The Woodlands, TX 77382-2652

John G Galik
34 Greenview St
Montgomery, TX 77356

Kristin Michelle Galik
34 Greenview Street
Montgomery, TX 77356

Kristin M Galik
34 Greenview St
Montgomery, TX 77356

Garmin
1200 E. 151st Street
Olathe, KS 66062

John P Gene
305 Mockingbird Lane
Weatherford, TX 76086

General Aviation Services
5260 Central PKWY, Hanger 14
Conroe, TX 77303

Genuine Aircraft Hardware
4250 Aerotech Ctr Way, Unit B
Paso Robles, CA 93446

Christian D.F. Gerthe
24909 Stone Xing
Montgomery, TX 77316

Dieter HM Gerthe
24909 Stone Xing
Montgomery, TX 77316

Dave Giese
6110 Riverchase Trl
Kingwood, TX 77345

GoDaddy
14455 North Hayden Rd. 219
Scottsdale, AZ 85260

Gs Bank Usa
Lockbox 6112
Philadelphia, PA 19170

Joe Guzman

Joseph Guzman
1400 West Abram c/o Hill Gilstrap PC
Arlington, TX 76013

Aaron Hebert
5215 N Twin City Hwy
Port Arthur, TX 77642

Michael Hicks
3306 Cunningham Rd
Wallis, TX 77485

High Desert Avionics
4555-9 West G Ave
Lancaster, CA 93536

James Hoffpauir
P.O. Box 896
Onalaska, TX 77360

David W Holden
68 Rua Martine
Miramar Beach, FL 32550

Barbara A Holder
12152 Ivy Drive
Conroe, TX 77303

Robert W Holder
12152 Ivy Drive
Conroe, TX 77303

Impress Computers
21733 Provincial Blvd 110
Katy, TX 77450

Jon L Infante
988 Arbor Glen
Conroe, TX 77303

Internal Revenue Service
Insolvency Section
1919 Smith St., Stop 5022 HOU
Houston, TX 77002

Patrick A James
12370 Ridgecrest
Willis, TX 77318

Van Johnson
27911 FM 2100 Rd
Huffman, TX 77336

JP Instruments, Inc
3185-B Airway Avenue

K&B Aviation GP LLC
Attn: Brent Franks
6609 Avenue U
Houston, TX 77011

Kabbage/Celtic Bank
PO Box 77081
Atlanta, GA 30357

Steven D Keener
9782 West Shore Dr
Willis, TX 77318

Larry Kelley
7165 Royal Meadows St
Port Arthur, TX 77642

Lucas D Lacock
1923 W Welsford Dr
Spring, TX 77386-2544

Andy Lauth
10013 Military Dr
Conroe, TX 77303

Richard Leofsky
14100 Lakeport Dr
Willis, TX 77318

LexisNexis
RELX Inc. DBA LexisNexis
PO Box 733106
Dallas, TX 75373

Lexus Financial Services
P.O. Box 4102
Carol Stream, IL 60197-4102

Robert Limbaugh
117 Fairhope Ave
Fairhope, AL 36532

Gary Martin
440 Forest Dr
Lake Jackson, TX 77566

Randy Martin
4973 Hilltop Ranch Ct
Montgomery, TX 77316

Sam McCaskill
P.O. Box 340339
Austin, TX 78734

Joe McDaniel
6027 US Highway 259 N
Henderson, TX 75652

Todd McQuown
108 Ebner Lake Front Dr
Montgomery, TX 77316

Mid-Continent Instruments
9400 E 34th Street North
Wichita, KS 67226

Montgomery County MUD #18
P.O. Box 1170
Montgomery, TX 77356

Mouser Electronics
1000 North Main Street
Mansfield, TX 76063

David Murphy
19606 Powerscourt Dr
Humble, TX 77346

MW Aircraft Services
10298 C Pickerings Mem Dr
Conroe, TX 77303

Navient
Attn: Bankruptcy
PO Box 9000
Wiles-Barr, PA 18773-9000

Nelnet
Attn: Bankruptcy Claims
PO Box 82505
Lincoln, NE 68501-2505

OnDeck Capital, Inc.
101 West Colfax Ave., 10th Floor
Denver, CO 80202

Doug Osterhus
P.O. Box 72
Bellaire, TX 77402

Mason Pearsall
12507 Telge Road
Cypress, TX 77429

Pitney Bowes
3001 Summer St
Stamford, CT 06905-4317

Plains State Bank
PO Box 62005
Houston, TX 77205

Plane Den Aircraft
Structures, LLC
1137 Brecon Lane
Austin, TX 78748

Pool Tec Pool & Spa
17118 Grey Oaks Dr
Conroe, TX 77385

Adam R Probst
265 Thunderbird Dr
Conroe, TX 77304

Robert H Putz, Jr
3306 Durant Ct
Bryan, TX 77802

Cory Rance
12071 S Whitehall Rd
Moody, TX 76557

Cory Rance
1400 West Abram c/o Hill Gilstrap, PC
Arlington, TX 76013

Thomas A Roberston
311 Elkins Lake
Huntsville, TX 77340

Joey and Casey Robinson
311 Elkins Lane
Huntsville, TX 77340

Daniel Schultz
16192 Coastal Hwy
Lewes, DE 19958-3608

Security Bank Crawford
PO Box 90
Crawford, TX 76638

Security Service FCU
Risk Management
PO Box 691586
San Antonio, TX 78269

Seiler Mitby, PLLC
Attn: Kenna Seiler
2700 Research Forrest Dr 100
Spring, TX 77381

Azhar Sindhu
19123 Aquatic Dr
Humble, TX 77346

Snap On Crdt
950 Technology Way Suite 301
Libertyville, IL 60048

Steve Souders
37703 Parkway Oaks
Magnolia, TX 77355

Synchrony Bank/Care Credit
Attn: Bankruptcy Dept
PO Box 965064
Orlando, FL 32896-5060

Tachus
2407 Timberloch Place G
Spring, TX 77389

Texas Aircraft Instruments
1911 South Gordon Street
Alvin, TX 77511

Texas Comptroller of Public
Accounts
111 East 17th Street
Austin, TX 78774

Textron Aviation
23260 Newark Place
Chicago, IL

Toyota Financial Services
Attn: Bankruptcy
PO Box 8026
Cedar Rapids, IA 52409-8026

John Tuggle

UPS
P.O. Box 7247-0244
Philadelphia, PA 19170

USAA Federal Savings Bank
Attn: Bankruptcy 10750 McDermott
Freeway
San Antonio,, TX 78288-9876

USAA Property and Casualty
10750 McDermott Fwy
San Antonio, TX 78288-0570

Van Bortel Aircraft, Inc
4912 S Collins St
Arlington, TX 76016

Gerry Venteicher
121 Southwood Dr
Bossier City, LA 71111-6050

Verizon Wireless
PO Box 489
Newark, NJ 07101

David Vineyard
324 Burrows St
Nacogdoches, TX 75965

Vivent-Security System
62992 Collections Dr
Chicago, IL 60693-0629

VNE Aviation, LLC
Attn: Michael Wise
675 Clear Springs Hollow
Buda, TX 78610

Volkswagen Credit, Inc
Attn: Bankruptcy
PO Box 3
Hillboro, OR 97123-0003

George Walker
12412 Sagittarius Dr E
Willis, TX 77318

George Walker
c/o Hill Gilstrap, PC
Arlington, TX 76013

Watchdog Security
330 Rayford Rd. 207
Spring, TX 77386

Bruce Webber
201 Stearman Dr
Georgetown, TX 78628

Wells Fargo Bank
Attn: Written Correspondence Dept
PO Box 10335
Des Moines, IA 50306

Wells Fargo Bank NA
Attn: Bankruptcy 1 Home Campus MAC
X2303-01A
Des Moines, IA 50328

Wf/gallery
Po Box 14517
Des Moines, IA 50306

Wf/matfirm
Po Box 14517
Des Moines, IA 50306

Ryan Wheless
13810 Champion Forest Dr 02
Houston, TX 77069

WireMasters
P.O. Box 734418
Chicago, IL 60673

Don Wootton
22606 Main Blvd #1
Tomball, TX 77377

Xylon Aviation LLC
1050 Bentwater Dr.
Montgomery, TX 77356

Fill in this information to identify the case:

Debtor name OutRight Avionics, LLC

United States Bankruptcy Court for the:

Southern District of Texas, Houston Division

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors****12/15**

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/07/2020
MM/ DD/ YYYY

X/s/ John Galik

Signature of individual signing on behalf of debtor

John Galik
Printed name

President
Position or relationship to debtor